

Department of Health OF NOVETTAL GUIDE TO THE OF TH OF NONFATAL SUICIDE-RELATED OUTCOMES (ED-SNSRO) 2021 ANNUAL BRIEF

The Centers for Disease Control and Prevention (CDC) funds the ED-SNSRO cooperative agreement to help states increase the timeliness of surveillance of nonfatal suicide-related outcomes. The goal is to collect and disseminate high quality, complete, and timely syndromic surveillance data on nonfatal suicide including nonfatal self-harm, suicide attempt, suicidal ideation, and intentional drug/opioid overdose. New York State Department of Health (NYSDOH) aims to rapidly track and respond to changing patterns in suicide within each county in New York State, excluding New York City (NYC) by collaborating with counties for suicide prevention and crisis response.

Syndromic Surveillance: Emergency department (ED) syndromic surveillance is based upon ED patient chief complaints and diagnosis codes that are electronically submitted to NYSDOH from NYS participating hospital EDs (99% or 133 of 134, excluding NYC and Veteran Affairs hospital EDs). Custom software reads the chief complaint and diagnosis code fields of every patient record and searches for disease or medical condition related words, phrases, symptoms, and diagnosis codes. When a match occurs, the record is assigned to one or multiple syndromes. A syndrome is defined as a disease or medical condition characterized by a set of symptoms and diagnosis codes. Nonfatal suicide is 1 of the 17 NYSDOH recorded syndromes. *NYC syndromic surveillance is collected by the NYC Department of Health and Mental Hygiene.

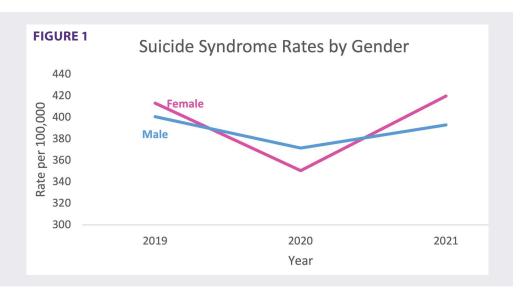
For more information, please visit the NYSDOH website: www.health.ny.gov/statistics/prevention/injury prevention/suicide selfinflicted.htm or contact suicideprevention@health.ny.gov

If you or someone you know is in crisis, please text GOT5 to 741-741 to connect with a Crisis Text Line counselor or call the National Suicide Prevention Lifeline at 1-800-273-8255

The CDC indicated a 48% decline in overall ED visits in the New York/New Jersey region during the early COVID-19 pandemic. Numbers reported during this time may have been impacted by increased SARS-CoV-2 transmission risk and public concerns about visiting the ED during the pandemic, and use of virtual visits (CDC, June 2020).

YEAR	2019	2020	2021
Gender	Frequency	Frequency	Frequency
	**Rate	Rate	Rate
Female	22,611	19,728	23,645
	413.4	350.4	419.9
Male	22,642	20,256	21,436
	400.7	371.5	393.1
Jnknown	25	24	28
	N/A	N/A	N/A
Total:	45,278	40,004	45,109
otal Pop.:	11,120,206	11,083,563	**11,083,563

[&]quot;Unknown" variable excluded from Figure 1



^{*}Information for the New York City Department of Health and Mental Hygiene syndromic surveillance can be found at https://a816-health.nyc.gov/hdi/epiquery/visualizations?PageType=ps&PopulationSource=Syndromic

^{**}Rates are per 100,000 population of NYS (excluding NYC) determined via www.cdc.gov/nchs/nvss/bridged_race.htm. 2021 census population numbers are projected from 2020. Rates and frequencies included only reflect 99% of participating ED facility data and do not reflect fatalities, suicide-related cases not reported to New York State (excluding NYC) EDs.

ABLE 2: AGI			
YEAR	2019	2020	2021
Age group	Frequency	Frequency	Frequency
(In years)	**Rate	Rate	Rate
0.0	480	339	397
0-9	38.7	27.6	32.3
10-19	10,853	9,472	12,874
10-19	780.0	689.7	937.4
20-24	5,728	5,092	5,567
	762.0	685.8	749.7
25-34	8,951	8,497	8,800
	646.3	615.1	637.0
35-44	6,513	6,084	6,472
33-44	503.5	466.7	496.5
45-54	5,830	4,510	4,538
43-34	403.8	322.1	324.1
55-64	4,518	3,892	4,072
33-0 4	282.7	244.4	255.7
65-74	1,515	1,317	1,534
05-74	132.5	112.0	130.4
75 04	578	524	576
75-84	97.4	86.6	95.1
0.5	312	281	279
85+	111.2	100.6	99.9

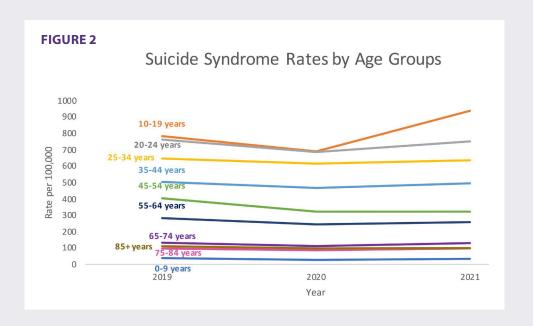
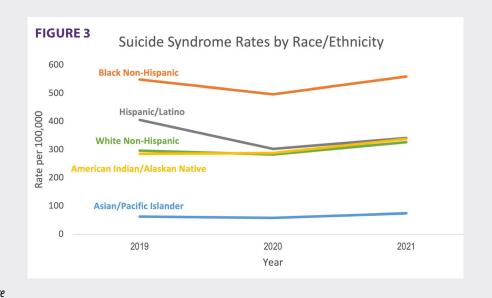
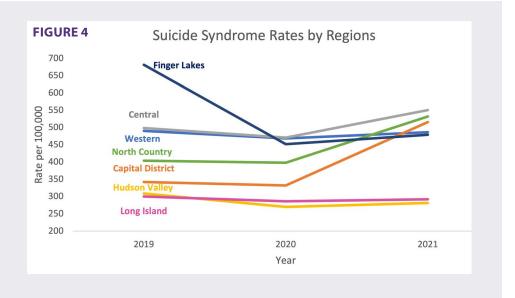


TABLE 3: RACE/ETH	TABLE 3: RACE/ETHNICITY		
YEAR	2019	2020	2021
Race/Ethnicity	Frequency	Frequency	Frequency
<u> </u>	**Rate	Rate	Rate
White non-Hispanic	24,232	22,908	26,469
winte non inspanic	296.3	282.8	326.8
Black non-Hispanic	5,785	5,271	5,934
Diack non inspanic	548.3	496.3	558.8
Hispanic/Latino	5,370	4,078	4,602
mopanic, Latino	405.4	302.5	341.3
American Indian/	125	127	149
Alaskan Native	284.9	288.0	337.9
Asian/Pacific Islander	327	309	394
Asian/i acinc isianaci	62.9	58.3	74.4
Multiracial/ Other	2,755	2,461	2,926
multifacial, other	N/A	N/A	N/A
Not stated	6,684	4,854	4,635
Hot stateu	N/A	N/A	N/A
Bridged race data was used to d	calculate rates. "Multira	cial/Other" and "Miss	ing" variables excl



ABLE 4: REGION			
YEAR	2019	2020	2021
***Region	Frequency	Frequency	Frequency
	**Rate	Rate	Rate
Western	7,430	7,078	7,347
	490.5	468.9	486.7
Capital District	4,515	4,364	6,781
	342.5	332.1	516.0
Central	7,915	7,426	8,688
	498.8	470.9	550.9
Hudson Valley	7,184	6,268	6,540
	308.9	269.9	281.6
Long Island	8,509	8,088	8,253
	300.2	286.2	292.1
North Country	1,128	1,107	1,481
	403.8	398.0	532.4
Finger Lakes	8,597	5,677	6,019
	681.8	451.8	479.0



^{**}Rates are per 100,000 population of NYS (excluding NYC) determined via www.cdc.gov/nchs/nvss/bridged race.htm. 2021 census population numbers are projected from 2020.

Rates and frequencies included only reflect 99% of participating ED facility data and do not reflect fatalities or suicide-related cases not reported to New York State (excluding NYC) EDs.

***Region counties (Greene, Hamilton, Seneca, Tioga, and Washington counties do not have an ED facility):

Western: Allegany, Cattaraugus, Chautaugua, Erie, Genesee, Niagara, Orleans, Wyoming

Capital District: Albany, Columbia, Delaware, Fulton, Greene, Montgomery, Otsego, Rensselaer, Saratoga, Schenectady, Schoharie, Warren, Washington

Central: Cayuga, Chenango, Cortland, Herkimer, Jefferson, Lewis, Madison, Oneida, Onondaga, Oswego, Tioga, Tompkins

Hudson Valley: Dutchess, Orange, Putnam, Rockland, Sullivan, Ulster, Westchester

Long Island: Nassau, Suffolk

North Country: Clinton, Essex, Franklin, Hamilton, St. Lawrence **Finger Lakes:** Chemung, Livingston, Monroe, Ontario, Schuyler, Seneca

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